REMARKS

IN THE CLAIMS

The abstract has been amended so that the abstract is now a single paragraph having between 50-150 words.

The Examiner objected to the disclosure because of missing serial numbers for the applications listed on page six. The specification has been amended to now include the U.S. patent number of those applications which have issued as U.S. patents and to include the serial number for those applications which are still pending. Applicant has also inserted the serial number for the application listed on the last paragraph of page twelve and made typographical corrections on page twenty-six. No new matter has been added to the application, as this information was already contained implicitly within the specification.

Claim 1 was rejected under §103 as unpatentable over Engleson (U.S. Patent No. 5,781,442). The examiner states that it is old and notoriously well known in the art to input operating data from the drug pump manufacturer to the communication server for a smooth operation of the pump and alert operator of any types of abnormalities. Engleson discloses a patient management system capable of monitoring, controlling, and tracking the administration of care in a *healthcare institution* e.g., a hospital. Claim 1 as amended recites a computerized network of patient nodes, clinician nodes, pharmaceutical nodes, drug pump manufacturer nodes and means for configuring *implantable drug pumps* with data gathered from a patient, a clinician, a drug pump manufacturer, and a pharmacy. By contrast, Engleson does not disclose obtaining information from a drug pump manufacturer such as is required by amended claim 1.

The present invention provides for a communications environment for *drug pump manufactures* and clinicians to directly assess not only the information supplied by an implantable drug pump, but also integrate data from other data sources, such as pharmacies, therapeutic agent producers, implantable device manufacturers, other treatment providers, and the like. This gives direct connectivity between the patient, the implantable drug pump manufacturer, the physician, the pharmacist, and the implantable device surgeon with the implantable drug pump. There is no suggestion in the Engleson reference that drug pump data be submitted by a manufacturer or that the manufacturer be able to retrieve information from the

drug pump to aid in maintenance, monitoring, and quality control. The Engleson reference does not teach the clinician, implantable drug pump manufacturer, and pharmacist having coordination with each other. Further, the dosage calculation system disclosed in Engleson does not provide the patients, other clinicians, pharmacists and dispensaries, and drug pump manufactures with connectivity to each other. Therefore, claim 1 as amended is patentably distinct from Engleson.

Claims 2 and 3 depend from allowable base claim 1 and, therefore, are also patentably distinct from Engleson.

A similar argument is applicable for claims 4-31 and, therefore, claims 4-31 are therefore patentably distinct from Engleson.

In light of the above, applicant respectfully submits that claims 1-31 are in condition for allowance. As these are the only claims pending in this application issuance of a Notice of Allowance is courteously solicited.

Please treat any communication filed at any time in this application requiring a petition for an extension of time under 37 CFR §1.136(a) towards timely submission as incorporating a proper petition for an extension of time and the appropriate length of time. To the extent any communications in this application are not accompanied by payment sufficient to cover the required extension of time fees it is requested such deficiency be charged to deposit account 061910.

Respectfully Submitted

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